

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

FILE COPY

In re the Application of .

Jae Kwan LIM

Application No.: 09/373,704

Filed: August 13, 1999

For: METHOD OF INCREASING SWITCH CAPACITY

REQUEST FOR CORRECTED FILING RECEIPT

Box: Patent Application  
Commissioner of Patents and Trademarks  
Washington, D. C. 20231

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NOV 20 1999  
TG 2700 MAIL ROOM

Sir:

A corrected filing receipt is hereby requested in view of the errors which appear in the original. For the convenience of the Patent and Trademark Office, attached is a photocopy of the original receipt on which the errors have been noted in red.

X PTO ERROR - As the error was made by the Patent and Trademark Office, it is believed that no fee is due. However, please credit or debit Deposit Account No. 16-0607 as necessary to effect entry of the attached corrections.

   APPLICANT'S ERROR - In accordance with the provisions of 37 C.F.R. 1.19(h), our Check No. \_\_\_\_\_ in the amount of \$25.00 is attached. Please credit or debit Deposit Account No. 16-0607 as necessary to effect entry of the attached corrections.

Respectfully submitted,  
FLESHNER & KIM

Daniel Y.J. Kim  
Registration No. 36,186

P. O. Box 221200  
Chantilly, VA 20153-1200  
Telephone: (703) 502-9440  
Date: September 24, 1999

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SERIAL NUMBER 09/373,704	FILING DATE 08/13/99	CLASS 370	GROUP ART UNIT 2733	ATTORNEY DOCKET NO. K-102
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APPLICANT

JAE KWAN LIM, SEOUL, REPUBLIC OF KOREA.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

None BP

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

None BP

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED REPUBLIC OF KOREA 33454/1998

08/18/98

yes BP

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED 08/30/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY KRX	SHEETS DRAWING 7	TOTAL CLAIMS 12	INDEPENDENT CLAIMS 2
Verified and Acknowledged <u>Brenda H. Pham</u> Examiner's Initials Initials					

ADDRESS

THE LAW OFC OF  
FLESHNER & KIM  
PO BOX 221200  
CHANTILY VA 20153-1200

TITLE

METHOD OF INCREASING SWITCH CAPACITY

FILING FEE RECEIVED \$760	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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